# 1045-K

# Kentucky Net Operating Loss Application for Income Tax Refund

42A740-S20 REVENUE CABINET

(See instructions for when to file)

➤ For use by taxpayers other than corporations.

2000

6. Adjusted gross income from tax return A. Spouse		Last Name	First Name (	Joint or combined	return, give both i	names and initials.)	Social Secur	ity or Federal Ident	ification Number	
(a) Net Operating Loss (from page 2, Schedule A, line 24)  1. This application is filed to carry back:  2. Return for the year Jan. 1-Dec. 31, 2000, or other tax year beginning  3. If spouse filed a separate return for a carryback year, indicate year  4. If Social Security number for carryback year is different from above, enter number and indicate the year(s)  5. If you have changed your accounting period, give date permission to change was granted  Computation of Decrease in Tax  (see instructions)  6. Adjusted gross income from tax return  A. Spouse  B. Yourself (or joint)  7. Net operating loss deduction  A. Spouse  B. Yourself (or joint)  8. Adjusted gross income after carryback  A. Subtract line 7A from line 6A  B. Subtract line 7A from line 6A  B. Subtract line 7B from line 6B  B. Subtract line 7B from line 6B  B. Subtract line 7B from line 8B  B. Subtract line 9B from line 8B  B. Subtract line 9B from line 8B  B. Subtract line 9B from line 8B  11. Income tax liability  Date Filed  Date File	Number and Street or P.			.O. Box		Apt. Numbe	Spouse's Social Security Number		y Number	
1. This application is filed to carry back:  2. Return for the year Jan. 1-Dec. 31, 2000, or other tax year beginning  3. If spouse filed a separate return for a carryback year, indicate year  4. If Social Security number for carryback year is different from above, enter number and indicate the year(s).  5. If you have changed your accounting period, give date permission to change was granted.  Computation of Decrease in Tax  (see Instructions)  Carryback  (a) Before Carryback  (a) Before Carryback		City	ate and ZIP Code				Telephone Number			
2. Return for the year Jan. 1-Dec. 31, 2000, or other tax year beginning , 2000, ending , 2000,				a) Net Operating Loss (from page 2, Schedule A, line 24)				(b) Unused Unemployment Tax Credit		
other tax year beginning , 2000, ending , Date Filed ➤  3. If spouse filed a separate return for a carryback year, indicate year		This application is filed to carry back: \$					\$			
3. If spouse filed a separate return for a carryback year, indicate year	2.	•	2000, or							
4. If Social Security number for carryback year is different from above, enter number and indicate the year(s)								>		
and indicate the year(s)							<b>&gt;</b>			
Computation of Decrease in Tax (see instructions)    Adjusted gross income from tax return	4.		=				<b>&gt;</b>			
Tax Year Ended ➤ Tax Year Ended ➤ Tax Year Ended ➤  (a) Before Carryback (b) After Carryback (c) Before Carryback (c) Before Carryback (c) Ca	5.	If you have changed your accounti	ing period,	give date permis	ssion to change	was granted	<b>&gt;</b>			
Computation of Decrease in Tax (see instructions)  (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (f) After Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (b) After Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (a) Before Carryback (c) Before Carryback (d) After Carryback (e) Before Carryback (a) Before Carryback (						Prece	ding			
Carryback Carryb		Computation of Decrease in T	ax	_		_		_		
A. Spouse		(see instructions)		` '		` '		` '	(f) After Carryback	
A. Spouse	6.	A. Spouse								
8. Adjusted gross income after carryback A. Subtract line 7A from line 6A B. Subtract line 7B from line 6B 9. Itemized/standard deduction A. Spouse B. Yourself (or joint) 10. Taxable income A. Subtract line 9A from line 8A B. Subtract line 9B from line 8B 11. Income tax liability	7.	A. Spouse								
A. Spouse	8.	Adjusted gross income after carryla.  A. Subtract line 7A from line 6A.	back							
10. Taxable income A. Subtract line 9A from line 8A B. Subtract line 9B from line 8B	9.									
11. Income tax liability	10.	Taxable income								
A. Spouse	11.	Income tax liability								
B. Yourself (or joint)		•								
12. Total (add lines 11A and 11B)	12.	Total (add lines 11A and 11B)								
13. Enter amount from line 12, cols. (b),	13.	Enter amount from line 12, cols. (b	o),					l		
(d) and (f) in cols. (a), (c) and (e)		(d) and (f) in cols. (a), (c) and (e)								
14. Decrease in tax (subtract line 13 from line 12)	14.		<u></u>							

I, the undersigned, declare under penalties of perjury that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I also understand and agree that our election to file a combined return under the provisions of Regulation 103 KAR 17:020 will result in refunds being made payable to us jointly and in each of us being jointly and severally liable for all taxes accruing under this return.

	<b>&gt;</b>	
ignature (If joint application, both must sign.)	Spouse's Signature	Date Signed

Typed or Printed Name of Preparer Other Than Taxpayer

Firm I.D. Number of Preparer

Date

7402200013



Do not attach to your income tax return.

Mail in a separate envelope.

Form 1045-K (2000) SCHEDULE A—Computation of Kentucky Net Operating Loss Note: If line 3 is zero or more, do not complete rest of schedule. You do not have a net operating loss. **Adjustments** 4. Enter your nonbusiness capital losses (enter as a positive number) 4 5. Enter your nonbusiness capital gains (see federal instructions) ... 5 If line 4 is more than line 5, enter difference; otherwise, If line 5 is more than line 4, enter difference; otherwise, Nonbusiness deductions 8 Nonbusiness income (other than capital gains)..... Add lines 7 and 9 ...... 10 11. If line 8 is more than line 10, enter difference; otherwise, enter zero 12. If line 10 is more than line 8, enter difference (but do not enter more than line 7); otherwise, enter zero ....... 12 13. Enter your business capital losses (enter as a positive number) .. 13 14. Enter your business capital gains ...... 14 Add lines 12 and 14 ...... 15 16. If line 13 is more than line 15, enter difference; otherwise, Enter the loss, if any, from federal Form 1040, Schedule D. line 17. (Estates and trusts, enter the loss, if any, from Form 741, Schedule D, line 17, column 3.) Enter as a positive number. If you do not have a loss on that line (and do not have a Section 1202 exclusion), skip lines 18 Subtract line 19 from line 18 ...... 20 Enter the loss from federal Form 1040, Schedule D, line 18. (Estates and trusts, enter the loss from Form 741, Schedule D, If line 20 is more than line 21, enter the difference; otherwise, enter -0-. 22 

## INSTRUCTIONS FOR SCHEDULE A (FORM 1045-K)—Computation of Net Operating Loss

Line 8—Nonbusiness deductions are those not connected with a trade or business. They include the following:

Note: If line 27 is zero or more, you do not have a net operating loss.

The standard deduction from line 2 above is allowed as a nonbusiness deduction if you do not itemize deductions. Itemized deductions are usually nonbusiness except for casualty loss deductions and any employee business expenses such as union dues, uniforms, tools and educational expenses.

The deductions allowed for payments to a Keogh retirement plan and individual retirement arrangement are nonbusiness deductions.

#### Do not include the following business deductions on line 8:

Long-term care and health insurance premiums.

Loss from the sale of accounts receivable, if such accounts arose under the accrual method of accounting.

7402200023

Casualty losses and theft losses are considered attributable to a trade or business. This is true even if they involve nonbusiness property. Your proportionate share of a partnership or an S corporation's loss. Losses on stock in small business corporations that qualify as

ordinary losses.

Loss resulting from the sale or exchange of small business investment company stock that qualifies as an ordinary loss.

Line 9—Nonbusiness income (other than capital gains)—Include income that is not from trade or business. Examples are dividends, annuities and interest on investments.

### Do not include the following business income on line 9:

Salaries and wages

Gain or loss on sale or other disposition of real or depreciable property used in your trade or business.

Your proportionate share of a partnership or an S corporation's

Lines 18 and 19—Adjust this amount by the appropriate addition or subtraction entered on Schedule M. For more information, see federal regulation Section 1.172-3 and federal Publication 536, Net Operating Losses